## Funaro, Patty [LEGIS]

From: Kathy Johnson < kjohnson@abbehealth.org>

Sent: Friday, December 15, 2017 5:36 PM

To: Costello, Mark [LEGIS]; Chelgren, Mark [LEGIS]; Mathis, Liz [LEGIS]; Ragan, Amanda

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Mikki [DHS]; Randol, Michael [DHS]

Cc: Funaro, Patty [LEGIS]

Subject: Health Policy Oversight Committee meeting Monday 12-18-17

**Attachments:** Oversight committee letter final- IHH Dec 2017.docx

Good evening. Attached you will find a copy of the comments that I hope to share with you during the Public Comment period at the Health policy Oversight Committee on Monday Dec 18<sup>th</sup> regarding recent changes made to the Integrated Health Home (IHH) services for individuals with a serious mental illness (SMI).

I understand that there may be many people in attendance at this meeting wishing to participate in public comment, and there may not be sufficient time to hear from everyone. Therefore, I wanted to send these comments to you directly.

I really appreciate the opportunity to be heard. I have spent the last 30 years working with individuals with mental illness, and I feel so strongly about these individuals not getting lost in the shuffle or falling through the cracks in the system. Despite having a mental illness, people can and do recover and become amazing citizens in our communities. But we need to provide them with what they need to make that happen. This is a population that needs specialized, outreach-oriented care coordination services, such as what they receive through the current specialized integrated health homes.

Thank you again for the opportunity to share my thoughts. See you Monday!

Kathy Johnson, LMSW CADC Executive Director, Abbe Mental Health Center

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December 15, 2017

An Affiliate of UnityPoint Health

Legislative Health Policy Oversight Committee Members:

Thank you for your dedication to the oversight of healthcare policy in lowa. I appreciate the opportunity to share my thoughts with you.

My name is Kathy Johnson, and I am the Executive Director of the Abbe Center for Community Mental Health, an affiliate of UnityPoint Health. The Abbe Center has been providing a full array of mental health services for over 68 years, and currently provides services in a nine county area in east central lowa. In addition, we are the largest Integrated Health Home provider in lowa, serving over 2,400 adults with a Serious Mental Illness (SMI).

I am here today to express my concerns over the changes to the Integrated Health Home services as implemented by UnitedHealthcare. I can distinctly remember exactly where I was when I read the original Request for Proposals (RFP) to apply for an Integrated Health Home grant back in 2011, because I was so excited. I had spent 30 years of my life devoted to helping individuals with a serious mental illness in their personal recovery journey. Despite our best efforts, we were missing a valuable component of what was needed to help them achieve full recovery. At the time, research was clear that individuals with a SMI were dying 25 years earlier than the general population, with an average life expectancy of only 53. At the time, I was 50, and the unfairness of this statistic impacted me immensely, both because of my age, and because I have family members with mental illness. This is not acceptable. The Integrated Health Home initiative gave Community Mental Health Centers in Iowa a chance to completely re-invent the way we provided services to those that need us the most.

The issue today centers around care coordination and who should provide these needed activities to individuals especially vulnerable. Care coordination sounds simple. And for some people, with even minimal prompting by their health care provider, they can engage in healthy behaviors which have positive impacts on their health outcomes. I am one of those people. Occasionally I forget to pick up a prescription, or am overdue on my mammogram. And a reminder letter or a phone call prompt does work to keep me on track. But for individuals with a SMI, their needs for coordinated care go far beyond this.

There is an interrelatedness between pursuing health and wellness, and the barriers caused by having a mental illness. As part of our Integrated Health Home activities, staff often finds themselves



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going above the usual care coordination activities and providing services for our enrolled members, such as:

- Providing outreach by going to the hospital inpatient units and homeless shelters to find the most vulnerable, high-need individuals with SMI to enroll.
- Being involved and present during inpatient discharge planning, ensuring that they have picked up their medications from the pharmacy, have follow-up appointments scheduled with their primary care and mental health providers and that they make it to those appointments.
- Completing housing applications and assisting with housing selection and moving needs.
   Providing transportation to and from medical and mental health provider appointments, food banks and other social service needs.
- Completing personalized Wellness Recovery Action Plans.
- Helping people open their mail at home and understand letters that they receive.
- Completing Regional MHDS applications for wrap-around funding of needed resources, including obtaining copies of bank statements, among other requirements.

Care coordination activities within a primary care office is no doubt a great addition to the health care system, and yields positive physical health outcomes. However, for many individuals with a SMI, their needs are different. Their barriers are different. The approach needs to be different. Individuals with a SMI need a specialized approach that includes outreach into their homes and community settings. I have great concern that this population that already is dying prematurely is going to get lost in the shuffle. There is a reason the State of Iowa developed a specialized integrated approach to this helping this population. I urge you to protect individuals by allowing very specialized care coordination through the established Integrated Health Homes.

Thank you for the opportunity to share my thoughts with you. If I can provide you with any other detailed information, please feel free to contact me directly at 319-297-3208 or by email <a href="mailto:kjohnson@abbehealth.org">kjohnson@abbehealth.org</a>.

Respectfully Submitted,

Kathy Johnson, LMSW, CADC Executive Director